· · ·									Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003								10821399						
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE				OTHER		
TO	OTAL CLAIMS		10					RATE FEE		1	RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE 385.00		OR	BASIC FEE	770.00		
TC	TAL CHARGE	ABLE CLAIMS	O minus 20=		. —			X\$ 9=		OR	X\$18=	1		
INC	EPENDENT C	LAIMS	/		•			X43=		OR	X86=			
ML	ILTIPLE DEPEN	NDENT CLAIM PI	RESENT					+145=		OR	+290=			
* If	the difference	in column 1 is	less than zero, enter "0" in column 2					TOTAL	_	385	OR	TOTAL		
CLAIMS AS AMENDED - PART II									- t	<u> </u>		OTHER	THAN	
<u>,</u>	17/05	(Column 1)	· · · · · · · · · · · · · · · · · · ·	(Colun	nn 2)	(Column 3)		SMALI		NTITY	OR	SMALL		
ENTA	1 1	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT A	Total	tal * 10 Minus		2	\Diamond			X\$ 9=			OR	X\$18=		
	Independent + 3		Minus					X43=	7		OR	X86=		
L	FIRST PRESE	NTATION OF MU	JUIPLE DEF	PENDENT	CLAIM	<u></u>		+145=			OR	+290=	1	
							L	TOTA				TOTAL ADDIT. FEE	/	
ADDIT. FEE												ADDIT. FEE	-	
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE		ADDI- TIONAL FEE	•	RATE	ADDI- TIONAL FEE	
MON	Total.	•	Minus	**		=		X\$ 9=	١		OR	X\$18=		
AMENDMENT	Independent	Independent + FIRST PRESENTATION OF MU		Minus ***		=		X43=	T		OR	X86=		
	FIRST PRESE	NIATION OF MU	ILI IPLE DEF	ENDENI	CLAIM		' [+145=	1		OR	+290=		
							L	TOTA			L	TOTAL ADDIT. FEE		
		(Column 1)		(Colum	n 2)	(Column 3)	μ	IDDII. FE			,	ADDIT. FELL		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ST BER USLY	PRESENT EXTRA		RATE		ADDI- FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=		X\$ 9=	ı		OR	X\$18=		
	Independent	*	Minus	***		=		X43=	1		OR	X86=		
	FIRST PRESE	NTATION OF ML	ILTIPLE DEF	ENDENT	CLAIM		! 	11AE-	†		Ì	+290=		
• 1	the entry in colur	nn 1 is less than th	e entry in colu	mn 2, write	"O" in col	lumn 3.	L	+145=	1		OR	TOTAL		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."														
1	The "Highest Num	ber Previously Paid	f For (Total or	Independe	nt) is the	highest numbe	r four	nd in the a	appr	opriate box	ın coli	JMN 1.		